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Bib Data Sheet

CONFIRMATION NO. 6666

SERIAL NUMBER 09/940,825	FILING DATE 08/27/2001 RULE	CLASS 348	GROUP ART UNIT 2622	ATTORNEY DOCKET NO. 10010667-1
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APPLICANTS

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** CONTINUING DATA *****

None *NDHH*

** FOREIGN APPLICATIONS *****

None *NDHH*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/03/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 7	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>[Signature]</i> Initials <i>NDHH</i>			
Verified and Acknowledged				

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TITLE

Digital image system and method for implementing an adaptive demosaicing method ✓ *NDHH*

FILING FEE RECEIVED 944	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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